## Amendments to the Claims:

This listing of claims will replace all prior versions and listings of claims in the application:

## **Listing of Claims**

- 1-55. (Canceled)
- 56. (Previously Presented) A method for retracting tissue adjacent a spinal location, comprising:

making an incision in a patient over a spinal surgical location;

inserting a retractor into the incision in the patient;

advancing the retractor to a position adjacent the spinal location, the retractor having a proximal end and a distal end and defining an access path therethrough, the distal end being positioned adjacent the spinal location and the proximal end extending through the incision and outside of the patient;

expanding at least a portion of the retractor adjacent the spinal location by moving a plurality of discrete segments of the retractor away from each other to retract tissue adjacent the spinal location, wherein the discrete segments at least partially surround said access path in the expanded configuration; and

performing a surgical procedure on the spine, wherein the surgical procedure is performed through the retractor.

- 57. (Previously Presented) The method of Claim 56, wherein expanding at least a portion of the retractor comprises moving at least three discrete segments of the retractor away from each other.
- 58. (Previously Presented) The method of Claim 56, wherein expanding at least a portion of the retractor comprises moving at least four discrete segments of the retractor away from each other.

- 59. (Previously Presented) The method of Claim 56, wherein expanding at least a portion of the retractor comprises moving five discrete segments of the retractor away from each other.
- 60. (Previously Presented) The method of Claim 56, wherein each of the discrete segments comprises an arcuate edge.
- 61. (Previously Presented) The method of Claim 56, wherein expanding at least a portion of the retractor causes a cross-sectional area of the access path at the distal end to be larger than a cross-sectional area of the access path at the proximal end.
- 62. (Previously Presented) The method of Claim 56, further comprising delivering a plurality of instruments simultaneously through the access path to perform the surgical procedure at the spinal location.
- 63. (Previously Presented) The method of Claim 56, wherein overlap exists between discrete segments in an unexpanded configuration, and wherein expanding at least a portion of the retractor comprises reducing overlap between adjacent discrete segments.
- 64. (Previously Presented) The method of Claim 56, wherein each of the discrete segments is made of a sheet material.
- 65. (Previously Presented) A method for retracting tissue adjacent a spinal location, comprising:

making an incision in a patient over a spinal location;

inserting a retractor into the incision;

positioning the retractor in the patient adjacent the spinal location, the retractor having a proximal portion and a distal portion;

pivoting the distal portion relative to the proximal portion; and

expanding at least a portion of the distal portion adjacent the spinal location by moving a plurality of discrete segments of the retractor away from each other to retract tissue adjacent the

spinal location; wherein overlap exists between discrete segments in an unexpanded and an expanded configuration, and wherein expanding at least a portion of the retractor comprises reducing overlap between adjacent discrete segments.

- 66. (Previously Presented) The method of Claim 65, wherein expanding at least a portion of the retractor comprises moving at least three discrete segments of the retractor away from each other.
- 67. (Previously Presented) The method of Claim 65, wherein expanding at least a portion of the retractor comprises moving at least four discrete segments of the retractor away from each other.
- 68. (Previously Presented) The method of Claim 65, wherein expanding at least a portion of the retractor comprises moving five discrete segments of the retractor away from each other.
- 69. (Previously Presented) The method of Claim 65, wherein each of the discrete segments comprises an arcuate edge.
- 70. (Previously Presented) The method of Claim 65, further comprising delivering a plurality of instruments simultaneously through the retractor to perform the procedure at the spinal location.

## 71. (Canceled)

72. (Previously Presented) The method of Claim 65, wherein each of the discrete segments is made of a sheet material.

73. (Previously Presented) The method of Claim 65, wherein expanding at least a portion of the retractor causes a cross-sectional area of the retractor at a first location to be larger than a cross-sectional area of the access path at a second location proximal of the first location.

74-86. (Canceled)

87. (Previously Presented) A method for retracting tissue adjacent a spinal location, comprising:

making an incision in a patient over a spinal surgical location;

inserting a retractor into the incision in the patient;

advancing the retractor to a position adjacent the spinal location, the retractor having a proximal end and a distal end, the distal end having a plurality of discrete segments and being positioned adjacent the spinal location and the proximal end being positioned outside of the patient, the retractor having a guiding mechanism including a slot with notches extending transverse to a direction in which the slot extends; and

expanding at least a portion of the retractor adjacent the spinal location by moving a plurality of discrete segments of the retractor away from each other to retract tissue adjacent the spinal location, wherein the discrete segments are moved away from each other by being guided incrementally along successive notches of the guiding mechanism.

- 88. (Previously Presented) The method of Claim 87, wherein expanding at least a portion of the retractor comprises moving at least three discrete segments of the retractor away from each other.
- 89. (Previously Presented) The method of Claim 87, wherein expanding at least a portion of the retractor comprises moving at least four discrete segments of the retractor away from each other.

- 90. (Previously Presented) The method of Claim 87, wherein expanding at least a portion of the retractor comprises moving five discrete segments of the retractor away from each other.
- 91. (Previously Presented) The method of Claim 87, wherein each of the discrete segments comprises an arcuate edge and a slot with notches.
- 92. (Previously Presented) The method of Claim 87, wherein expanding at least a portion of the retractor causes a cross-sectional area of the retractor at the distal end to be larger than a cross-sectional area of the retractor at the proximal end.
- 93. (Previously Presented) The method of Claim 87, further comprising delivering a plurality of instruments simultaneously through the retractor to perform the procedure at the spinal location.
- 94. (Previously Presented) The method of Claim 87, wherein overlap exists between discrete segments in an unexpanded configuration, and wherein expanding at least a portion of the retractor comprises reducing overlap between adjacent discrete segments.
- 95. (Previously Presented) The method of Claim 87, wherein each of the discrete segments is made of a sheet material.
- 96. (Previously Presented) The method of Claim 87, wherein each of said notches maintains a desired configuration of said retractor.
- 97. (Previously Presented) The method of Claim 87, wherein each of said notches prevents the retractor from moving from an expanded configuration to a contracted configuration.

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- 98. (Previously Presented) The method of Claim 87, wherein the guiding mechanism comprises at least three notches.
  - 99-111. (Canceled)